

# 2012-2013 School Year

## Free and Reduced Price School Meals Family Applications: Processing, Eligibility, Certification, and Verification

*Office of School Support Services*

*School Nutrition Programs*

*August 2012*

# Free and Reduced Price School Meals Family Application

<http://www.mich.gov/schoolnutrition>

## What's New

- [2012-2013 Paid Lunch Equity Tool](#) **XLS**
  - [Final Rule to Update School Lunches and Breakfasts Presentation](#)
  - [Michigan Nutrition Standards Toolkit](#)
  - [Quick Guide to Complete a MEGS+ 2012 CNP: National School Lunch Program Application](#) **DOC**
  - [SY-2012-13 Free and Reduced Price School Meals Family Application Packet\(14 pages\)](#) **PDF**
  - [Six Cents Certification Materials](#)
  - [School Year 2012-2013 Free and Reduced Price Schools Meals Family Application Materials](#)
  - [12 Steps to Conducting Verification](#)  
12 Steps to Conducting Verification
- 

## Online and Scanned Applications

The LEA may make free and reduced price family applications and supporting materials available electronically via the internet.

- ✓ Electronic Signatures permitted
- ✓ Paper Applications may be scanned

USDA/FNS does not evaluate, approve, or endorse any software for application processing. It is the responsibility of the LEA to assure the software complies with all the regulations for certification and verification.

# Free and Reduced Price School Meals Family Application

## FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION

**Part 1 -** If the child you are applying for is homeless, migrant, or a runaway, check the appropriate category and verify with the district/school Homeless Liaison or Migrant Coordinator at \_\_\_\_\_  
 \_\_\_\_\_ Homeless \_\_\_\_\_ Migrant \_\_\_\_\_ Runaway \_\_\_\_\_  
 Skip Part 2 and list the Child's Name, Grade, and Building in Part 3.

**Part 2 -** If any member of your household received Food Assistance Program (FAP), Family Independence Program (FIP), or FDIPIR, provide the name and case number for the person who receives benefits.  
 Name: \_\_\_\_\_ Case Number: \_\_\_\_\_ Bridge Card Numbers and Medicaid Numbers are NOT ACCEPTABLE case numbers  
 If a case number is provided, only students need to be listed in Part 3.

**Part 3 - Household Names -** List below all people living in your household, students and non-students, foster children, related or unrelated. For example, grandparents, other relatives, and/or friends, including yourself and children who live with you, must be listed.  
**Part 4 - Total Household Gross Incomes -** Include the amount of money and circle how often it is received. If the person does not receive any income "\$0" must be circled in the column "Circle if NO Income". If you listed a FAP/FIP/FDIPIR number in Part 2, skip to Part 5.

Names	Circle Yes if Foster Child	Grade (if applicable)	Building Name (if applicable)	Circle if NO Income	Earnings from Work (before any deductions and taxes)		Welfare, Child Support, Alimony		Pensions, Retirement, Social Security		All Other Income		
					weekly	every 2 weeks	weekly	every 2 weeks	weekly	every 2 weeks	weekly	every 2 weeks	
Example: Jane Doe	Yes			\$0	\$600	weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
1	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
2	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
3	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
4	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
5	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
6	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
7	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly
8	Yes			\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
						twice a month	monthly		twice a month	monthly		twice a month	monthly

**Part 5 - Signature and Last Four (4) Digits of Adult Social Security Number (Adult household member MUST sign and date.)**  
 If Part 4 is completed, the adult signing the form must also list the last four (4) digits of his or her Social Security Number or check the "I do not have a Social Security Number box". See Privacy Act Statement on the back of this page.

I certify (promise) that all information on this application is true and that all income is reported. I understand that the sponsor will get federal funds based on the information I give. I understand that sponsor officials may verify (check) the information. I understand that if I purposely give false information, my child may lose benefits and I may be prosecuted.

Sign Here: X \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Last Four (4) Digits of Adult Social Security Number: XXX-XX-\_\_\_\_\_ ☐ I do not have a Social Security Number

Address		City	Zip Code	County
Area/Call Home		Ext./Fax	Email Address	

By providing your mail address you may be notified via mail of your eligibility for free and reduced price school meals.

# Part 1: Homeless, Migrant, and Runaway Youth

- Homeless, migrant, and runaway youth are categorically eligible for free meals.

## FREE AND REDUCED PRICE SCHOOL MEALS FAMILY APPLICATION

Part 1 - If the child you are applying for is homeless, migrant, or a runaway, check the appropriate category and verify with the district/school Homeless Liaison or Migrant Coordinator at \_\_\_\_\_  
☐ Homeless    ☐ Migrant    ☐ Runaway    Skip Part 2 and list the Child's Name, Grade, and Building in Part 3.



# Regular Year and Summer Migrant Program Directors

## Migrant Education Directors

Go to: [www.michigan.gov/ofs](http://www.michigan.gov/ofs)

1. Scroll to Programs
2. Click Title I, Part C – Migrant

### Programs

- Title Program Overview 
- Section 31a At-Risk
- Title I, Part A
- Title I, Part C - Migrant 
- Title I, Part D - Neglected & Delinquent
- Title II, Part A - Teacher & Principal Training & Recruiting
- Title III - English Learner & Immigrant Education Programs
- Title X - McKinney Vento Homeless



# Homeless Liaisons

## Homeless Liaisons

Go to: [www.michigan.gov/ofs](http://www.michigan.gov/ofs)

1. Scroll to Programs
2. Click Title X – McKinney Vento Homeless

### Programs

- Title Program Overview 
- Section 31a At-Risk
- Title I, Part A
- Title I, Part C - Migrant
- Title I, Part D - Neglected & Delinquent
- Title II, Part A - Teacher & Principal Training & Recruiting
- Title III - English Learner & Immigrant Education Programs
- Title X - McKinney Vento Homeless 

## Part 2: Categorical Eligibility

- Only one case number is required to make all students in the household categorically eligible for free meals. The Family Assistance Program (FAP) and the Family Independence Program (FIP) numbers have nine digits in the case number beginning with the number 1.
- List the name of the person receiving FAP or FIP benefits and the case number
- If a case number is provided, only students need to be listed in part 3.

Part 2 - If any member of your household received Food Assistance Program (FAP), Family Independence Program (FIP), or FDPIR, provide the name and case number for the person who receives benefits.

Name: \_\_\_\_\_ Case Number: \_\_\_\_\_ Bridge Card Numbers and Medicaid Numbers are NOT ACCEPTABLE case numbers

If a case number is provided, only students need to be listed in Part 3.

## Direct Certification

If a paper application is submitted by a household for children who are directly certified, the LEA must disregard the paper application.

- Direct certification takes precedence over an application unless there are other children in the household that were not directly certified.
- Students on the Direct Certification Report are automatically certified as eligible for free school meals.
- Access to the direct certification report is through the Michigan Student Data System (MSDS).

# Categorical Eligibility

## Assistance Program Households

- Food Assistance (FAP)
  - Direct Certification
  - Application
- Family Independence (FIP)
  -  Direct Certification
  - Application
- FDPIR
  - Application

Categorical Eligibility for free meals is extended to all children in the household if any member of the household receives benefits from one of these assistance programs.

# Categorical Eligibility

## Other Source Categorical Eligibility

- Foster Children
  - Direct Certification
  - Application
- Homeless, Runaway, and Migrant
  - Signed list from coordinator/liaison
- Head Start/Even Start
  - Enrollment list from program coordinator

Categorical Eligibility for free meals is NOT extended to all children in the household.

## Foster Child Eligibility

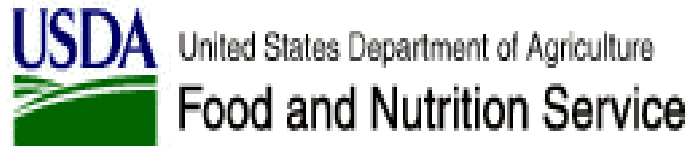
- Foster children are categorically eligible for free meals and may be certified without an application.
- Households with foster and non-foster children may choose to include the foster child as a household member, as well as any personal income earned by the foster child, on the same household application that includes their non-foster children.
- This may help the other children in the household qualify for free or reduced price meals based on household size and income.

## Foster Child Eligibility

- Eligibility determination for the remainder of the household is based on the household's income (including personal income earned by the foster child) or other categorical eligibility information reported on the application.
- Foster payments received by the family from the placing agency are not considered income and do not need to be reported.
- The presence of a foster child in the household does **not** convey eligibility for free meals to all children in the household in the same manner as FAP, FIP, and FDPIR participation does.
- Guardianship: Legal guardianship is **not** an automatic qualifier for free meals.

# Foster Child Eligibility

For more information :



<http://www.fns.usda.gov/fns/>

- Click on Regulations & Policy
- Scroll to Policy
- Click on School Meals
- Scroll to FY 2011
- Click on policy memo: 17-2011 [Child Nutrition Reauthorization 2010: Categorical Eligibility of Foster Children](#) (revised) 03-16-2011

## Part 3: Household Names

**First and last names of all** people living in the household must be included in Part 3:

Part 3 - Household Names - List below <i>all</i> people living in your household, students and non-students, foster children, related or unrelated. For example, grandparents, other relatives, and/or friends, including yourself and children who live with you, <i>must</i> be listed.			
Names	Circle Yes if Foster Child	Grade (if applicable)	Building Name (if applicable)
Example: Jane Doe	Yes		
1	Yes		
2	Yes		
3	Yes		
4			

- ✓ Students
- ✓ Non-students
- ✓ Foster children related and unrelated
- ✓ Exchange Students
- ✓ Grandparents
- ✓ Other relatives
- ✓ Friends
- ✓ The adult signing the application
- **All students** must have the **grade** and **name of the school/building** they will be attending listed on the application.
- An additional sheet may be attached if necessary.

# Income Eligible Applications

- Income applications are required for students who are not:
  - Directly certified
  - Categorically eligible
- Households must submit an application with current income information in order for benefits to be determined by household income.
- Income is the gross income received by a household before deductions.
- Every household member, listed in part 3, **must** indicate:
  - The source of the income
  - Amount of the income, even if it is zero
  - Frequency of the income

## Part 4: Total Household Gross Income

Part 4 - Total Household Gross Incomes - Include the amount of money and circle how often it is received.  
If the person does not receive any income "\$0" must be circled in the column "Circle if NO Income". If you listed a FAP/FIP/FDPIR number in Part 2, skip to Part 5.

Circle if NO Income	Earnings from Work (before any deductions and taxes)			Welfare, Child Support, Alimony			Pensions, Retirement, Social Security			All Other Income		
\$0	\$600	weekly	every 2 weeks		weekly	every 2 weeks	\$250	weekly	every 2 weeks		weekly	every 2 weeks
		twice a month	monthly		twice a month	monthly		twice a month	monthly		twice a month	monthly
\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
		twice a month	monthly		twice a month	monthly		twice a month	monthly		twice a month	monthly
\$0		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks		weekly	every 2 weeks
		twice a month	monthly		twice a month	monthly		twice a month	monthly		twice a month	monthly

Include the amount of money earned by **all** members of the household and circle how often it is received.

- Earnings from work must be gross income.
- Other income includes, but is not limited to, social security, pensions, retirement, welfare, child support, alimony, adoption subsidy, worker's compensation, unemployment, VA, and SSI.
- If a person does not receive any income, "\$0" must be circled in the column "Circle if NO Income."

*If you listed a FAP/FIP/FDPIR number in Part 2, skip to Part 5.*

# Income Frequency and Conversions

- If there are multiple income sources with more than one frequency, the LEA must **annualize** income by multiplying:
  - Weekly income by 52
  - Bi-weekly income (received every two weeks) by 26
  - Semi-monthly income (received twice a month) by 24
  - Monthly income by 12
- LEAs *cannot* use conversion factors such as 4.33 to convert weekly income or 2.15 to convert bi-weekly income to monthly amounts.
- **If income frequency is the same, there is no need for annualizing.**
- **Income eligibility guidelines** (IEGs) are the household size and income levels determined annually by the Secretary of Agriculture .
- All software programs should be checked for income eligibility guidelines update and must comply.

# Part 5: Adult Household Member Signature and Last 4 Digits of Social Security Number

<b>Part 5 - Signature and Last Four (4) Digits of Adult Social Security Number</b> <i>(Adult household member MUST sign and date.)</i>			
If Part 4 is completed, the adult signing the form must also list the last four (4) digits of his or her Social Security Number or check the "I do not have a Social Security Number box". See Privacy Act Statement on the back of this page.			
I certify (promise) that all information on this application is true and that all income is reported. I understand that the sponsor will get federal funds based on the information I give. I understand that sponsor officials may verify (check) the information. I understand that if I purposely give false information, my child may lose benefits and I may be prosecuted.			
Sign Here: X _____		Print Name: _____	Date: _____
Last Four (4) Digits of Adult Social Security Number: XXX-XX-_____		<input type="checkbox"/> I do not have a Social Security Number	
Address _____		City _____	Zip Code _____ County _____
Home/Cell Phone _____	Work Phone _____	Email Address _____	By providing your email address you may be notified via email of your eligibility for free and reduced price school meals.

- An adult member of the household *must* sign and date the form, list the last four (4) digits of their *Social Security Number*, or check the box “I do not have a Social Security Number.”

## Part 6: Racial/Ethnic Data Collection

- This section is optional for the household to complete. This racial/ethnic data collection may be used for completing the post award civil rights data collection that is required annually.
- Data can be used to determine if there are disparities between the potentially eligible population and the participating population or if there is discrimination.
- Outreach efforts can be targeted.

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### Part 6 - Child's Racial/Ethnic Identity (optional)

Check One or More Racial Identities:

☐ American Indian or Alaskan Native

☐ Black or African American

☐ Native Hawaiian or Other Pacific Islander

☐ Asian

☐ White

☐ Other

Check One Ethnic Identity:

☐ Hispanic or Latino

☐ Neither Hispanic or Latino

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## Part 6 continued....

- Make sure the privacy and non-discrimination statements are up to date.
- Verification information
  - Verification of applications must be completed by Nov. 15<sup>th</sup> annually.
- Verification results
  - Reason for change in eligibility based on verification results

### Privacy Act Information: Social Security Number

The Richard B. Russell School Lunch Act requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your child for free or reduced price meals. You must include the last four (4) digits of the Social Security Number of the adult household member who signs the application. The Social Security Number is not required when you apply on behalf of a foster child, list a FAP or FIP case number or other FDPIR identifier for your child, or indicate that the adult household member signing the application does not have a Social Security Number. We will use your information to determine if your child is eligible for free or reduced price meals and for administration and enforcement of the lunch and breakfast programs. We MAY share your eligibility information with education, health, and nutrition programs to help them evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into violations of program rules.

### Non-discrimination Statement: This explains what to do if you believe you have been treated unfairly.

"In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 832-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer."

### VERIFICATION - FOR SCHOOL USE ONLY

Date Selected for Verification: _____		Date Follow-up/Second Notice: _____		Date of Adverse Notice Sent: _____	
Confirming Officials Signature: _____		Follow-up Official's Signature: _____		_____	
Response Due from Household: _____		Verification Official's Signature: _____		_____	
FAP/FIP/FDPIR/Foster Eligibility:		Income		Verification Result	
_____ Not confirmed		_____ Wage Stubs		_____ Free to Reduced	
Confirmed:		_____ Written Documents		_____ Free to Paid	
_____ Department of Human Services		_____ Collateral Contact		_____ Reduced to Free	
_____ Notice of Eligibility		_____ Agency Records		_____ Reduced to Paid	
_____ Monthly		_____ Other _____		_____ No Change	
_____ Annual					
				Reason for Eligibility Change:	
				_____ Income	
				_____ Household Size	
				_____ Refused to Cooperate	
				_____ Other _____	

# Updated Non-discrimination Statement

## **Updated non-discrimination policy statement from The United States Department of Agriculture (USDA)**

The USDA is currently reviewing and updating the non-discrimination policy statement. Until the final non-discriminatory statement is approved; the following information statement should be used:

**In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.**

**To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.**

All information materials and sources, including web sites, used by Food Nutrition Services, State Agencies, local agencies, or other subrecipients to inform the public about FNS programs must contain a non-discrimination statement.

## Part 6 continued ....

- The federally defined School Year is July 1 through June 30.
- Applications cannot be accepted or processed prior to July 1 of the school year.
- All applications must be complete in order to determine eligibility.
- All applications must be processed within 10 days of receipt.
- All households can reapply at any time during the school year if they believe their benefits may increase.
- Households that have had their benefits terminated can reapply in the same school year but will need to submit proof of income or participation in SNAP, FIP, FAP, TANF, or FDPIR.
- Unapproved Applications: Benefits are not in effect if the application is not completed, dated, and signed by the determining official.

### APPROVAL/DISAPPROVAL - FOR SCHOOL USE ONLY

Annual Income Conversion: Weekly x 52, Every 2 Weeks x 26, Twice a Month x 24, Monthly x 12		
Household Size: _____  Total Gross Income: \$ _____ _____ Weekly _____ Every 2 Weeks _____ Twice a Month _____ Monthly _____ Annual	   _____ Number of Children Free _____ Number of Children Reduced _____ Number of Children Paid	Reason for Denial: _____ Income Too High _____ Incomplete Application _____ Other (specify) _____
Determining Official's Signature: _____ Date: _____ Date Dropped/Withdrawn: _____		

# Benefits Prior to Processing Applications

**30 day grace period for benefits starting the first day of school and up to and including the 30<sup>th</sup> day for:**

- Children in households with approved applications from the previous year.
- Newly enrolled students with approved applications from the LEA from the previous year.
- Previously approved children who transfer from one school to another under the jurisdiction of the same LEA.

**Carryover of previous year's eligibility also applies to:**

- Direct certification
- Categorical eligibility
- Head Start

**The new eligibility determination supersedes the carryover eligibility. Temporary approval is no longer in effect because of the year-long eligibility provision.**

## Administrative Approval

If a household fails to apply and the child is known to be eligible, local officials may complete an application on behalf of the child. The completed application should be :

- Based on the best household size and income information available.
- Approved with the source of the information noted.
- **Limited use** in individual situations and must not be used to make eligibility determinations for categories or groups of children.
- Excluded from verification.

The household must be notified that the child has been certified to receive free or reduced price benefits.

## Benefit Issuance List

Every school district has to compile a list with the names of students who are eligible for free and reduced price meals. This list should be:

- Updated/revised monthly.
- Used as documentation to support the monthly claim for reimbursement.
- Available at the point of service for a back-up system in case of a power outage or technical difficulty.

# Sharing Information, Records, and Documentation

## Section 7 of the Eligibility Manual:

- All records must be kept on file in a secure place for 3 years plus the current year.
- Document follow-up information provided by the household.
- Duplicate applications should be discarded. The school should keep an “inactive” file for those students no longer attending school.
- Application information cannot be used to determine citizenship as this is not a requirement for participation in school meals programs.
- Eligibility information **must never** be publicized or used in such a way that students’ eligibility categories may be recognized by other students.
- Sharing of free and reduced eligibility with the administration or enforcement of State Educational programs is allowed without parental consent. The numbers of eligible students, not names, can be shared with all programs (parental consent is needed for all other purposes).

## Verification

- Verification is confirmation of eligibility for free and reduced price meals under the National School Lunch Program (NSLP) and School Breakfast Program (SBP). Annually, each Local Educational Agency (LEA) must select and verify a sample of applications approved for meal benefits. The results of verification must be reported to the Michigan Department of Education (MDE) on the LEARS-Verification Summary Report website.
- The verification sample must be selected from households that have submitted an approved Free and Reduced Price School Meals Family Application as of October 1, 2012.
- *Verification is not required for children who have been certified for free meals by Direct Certification.*

## 12 Steps to Verification

1. Determine if your Local Education Authority (LEA) must complete an Improvement Plan.
2. Determine the sampling method your LEA must use to identify applications for verification.
3. Establish the Free and Reduced Price Meals application pool.
4. Calculate the sample size/number of applications that must be verified.
5. Conduct a Confirmation Review of the applications selected for verification.
6. Notify the selected households.
7. Contact the local Department of Human Services office to verify applications with a Food Assistance Program (FAP) or Family Independence Program (FIP) case number by using the following two forms.

## 12 Steps to Verification

8. Conduct a Follow-up Review for any household that has not responded by the original due date.
9. Notify all households of the final verification determination.
10. Make any required changes to benefit issuance documentation as required from the outcomes of the Verification process by November 15.
11. Complete all required Verification documents.
12. Complete the LEARS-Verification Summary Report **before March 1.**

# Verification for Just Cause

For more information :



<http://www.fns.usda.gov/fns/>

- Click on Regulations & Policy
- Scroll to Policy
- Click on School Meals
- Scroll to FY 2012
- Click on policy memo: 14-2012 [Procurement Questions Relevant to the Buy American Provision](#) 02-13-2012

# Verification

- Details of this process are in your manual, including links to the necessary forms and guidance.
- For more information: [www.michigan.gov/schoolnutrition](http://www.michigan.gov/schoolnutrition)
  - Scroll to What's New?
  - Click on 12 Steps to Conducting Verification

# Language Assistance

- Households with limited English proficiency (LEP) need to have access to information in other languages.
- LEAs must make a reasonable effort to the maximum extent practicable. This includes:
  - Application materials
  - Communications with households concerning eligibility determinations
- Volunteers may be used, but make sure they understand interpreter ethics – particularly confidentiality.
- Children should not be used as interpreters.

<http://www.fns.usda.gov/cnd/frp/frp.process.htm>

### Prototype Applications

Below are application and verification form *prototypes* for State agency consideration, all of which were updated in July 2011.

You may also want to use the "**I Speak**" document to help identify the primary language of non-English speakers. It uses short phrases in 33 languages that an applicant can check to indicate the language they speak. "I Speak" can help Local Educational Agencies select the appropriate translation as well as ensure consistent and effective interaction with applicants who have limited English proficiency.

English	(.doc)	(.pdf)
Arabic	(.doc)	(.pdf)
Armenian	(.doc)	(.pdf)
Cambodian	(.doc)	(.pdf)
Chinese (Traditional)	(.doc)	(.pdf)
Chinese (Simplified)	(.doc)	(.pdf)
Croatian	(.doc)	(.pdf)
Farsi	(.doc)	(.pdf)
French	(.doc)	(.pdf)
Greek	(.doc)	(.pdf)
Gujarati	(.doc)	(.pdf)
Haitian Creole	(.doc)	(.pdf)
Hindi	(.doc)	(.pdf)
Hmong	(.doc)	(.pdf)
Japanese	(.doc)	(.pdf)
Korean	(.doc)	(.pdf)
Kurdish	(.doc)	(.pdf)
Laotian	(.doc)	(.pdf)

# Spanish Translation for Free and Reduced Price School Meals Family Application

[www.michigan.gov/schoolnutrition](http://www.michigan.gov/schoolnutrition)

- Scroll to What's New
- Click on [School Year 2012-2013 Free and Reduced Price Schools Meals Family Application Materials](#)

Required materials that must be provided to households:

- [Letter to Parents \(3 pages printed front and back\)](#)
- [Letter to Parents - Spanish \(4 pages printed front and back\)](#)
- [Free and Reduced Price School Meals Family Application \(2 pages printed front and back\)](#)
- [Free and Reduced Price School Meals Family Application - Spanish \(2 pages printed front and back\)](#)
- [Free Special Milk Application 2012-2013](#)
- [Approval-Disapproval Letter to Households \(1 page\)](#)
- [Direct Certification Notification](#)

# Eligibility Manual

For more information, please refer to the *Eligibility Guidance for School Meals Manual* at:

<http://www.fns.usda.gov/cnd/guidance/default.htm>

The MDE website link is: [www.michigan.gov](http://www.michigan.gov)

- Scroll to Guidance
- Click on [Eligibility Certification and Verification](#)

# Questions?

- School Nutrition Programs
  - 517-373-3347
  - [MDE-schoolnutrition@michigan.gov](mailto:MDE-schoolnutrition@michigan.gov)
- Website <http://www.michigan.gov/schoolnutrition>

